## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10804634

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			100.0 17		(COIGINIT 27		]			7 7		,	
								RATE	FEE	-	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			3 0 minus 20=		* 10			X\$ 9=		OR	X\$18=	1.8 a	
INDEPENDENT CLAIMS			3 minus 3 =					X43=		OR	X86=	¢ .	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	950	
CLAIMS AS AMENDED - PART II										-	OTHER	THAN	
<u>.                                    </u>		(Column 1)	(Column 2)			(Column 3)	·	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total ·	*	Minus	**		=		X\$ 9=	·	OR	X\$18=		
	Independent	*	Minus	***		=	X43=	·	OR	X86=	·		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
								TOTAL		OR	TOTAL ADDIT. FEE		
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE													
AMENDMENT B		CLAIMS		HIGH	EST		1 6		ADDI-	1		ADDI-	
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=.		
	Independent	*	Minus	***		=		X43=	•		X86=		
	FIRST PRESE	NTATION OF MU	ENDENT	CLAIM		<b>!</b>			OR				
										OR	+290=	•	
										OR	TOTAL ODIT: FEE		
		_	DDIT. FEE <b>l</b>	٠.			•						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOUS PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							740-		OR	7.00=		
* 14	the entry is selve	nn 1 is loss than it		O	10° i='	2		+145=		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***OF TOTAL ADDIT. FEE											4		
7	he "Highest Num	mber Previously Paid ber Previously Paid	io For (Total, or	SPACE is Independer	iess than nt) is the l	i 3, enter "3." highest number			opriate box				